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186

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO. APPLICANT(S)	FILING DATE					
CLAIMS	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		B.D.	D.E.P.	B.D.	D.E.P.	B.D.	D.E.P.
	1	1	1	1	1	1						
2												
3												
4												
5												
6												
7												
8		3		3		3						
9		3		3		3						
10		3		3		3						
11		3		3		3						
12		3		3		3						
13		3		3		3						
14		1		1		1						
15		1		1		1						
16		1		1		1						
17		1		1		1						
18		1		1		1						
19		1		1		1						
20		1		1		1						
21		1		1		1						
22		2		3		3						
23		3		3		3						
24												
25												
26												
27												
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44												
45												
46												
47												
48												
49												
50												
TOTAL IND.												
TOTAL DEP.	3											
TOTAL CLAIMS	30	30	30	30	30	30	30	30	30	30	30	30

186

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 10/728407 FILING DATE

APPLICANT(S)

CLAIMS

AS FILED	AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		CLAIMS
	IND	DEP	IND	DEP	
1	/				
2	/				
3	/		/		
4	/		/		
5	/				
6	/				
7	/				
8	3		3		
9	3		3		
10	3		3		
11	3		3		
12	3		3		
13	3		3		
14	1				
15	/				
16	/				
17	/				
18	/				
19	/		1		
20	/		1		
21	/		1		
22	2		3		
23	3		3		
24	2		3		
25					
26					
27					
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44					
45					
46					
47					
48					
49					
50					
TOTAL IND.	4		4		
TOTAL DEP.	36	4	30	30	
TOTAL CLAIMS	40	34	36	36	

CLAIMS	IND	DEP	IND	DEP	IND	DEP
51						
52						
53						
54						
55						
56						
57						
58						
59						
60						
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62						
63						
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94						
95						
96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						